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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS

Application Number	10/606614
Filing Date	June 26, 2003
First Named Inventor	
Art Unit	
Examiner Name	
Attorney Docket Number	15210

To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Please withdraw me as attorney or agent for the above identified patent application, and

- all the attorneys/agents of record.
 the attorneys/agents (with registration numbers) listed on the attached paper(s), or
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NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are: I no longer legally represent the assignee.

CORRESPONDENCE ADDRESS

1. The correspondence address is NOT affected by this withdrawal.
2. Change the correspondence address and direct all future correspondence to:

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<input type="checkbox"/>	Firm or Individual Name			
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Signature	/Stephen Michael Patton #36,235/			
Name	Stephen Michael Patton	Registration No.	36,235	
Date	01-09-2006	Telephone No.	309-765-5543	

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

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